

Section 12 Person – Child Fatality Review

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CFR records available on victim: KCFR

Name	Definition
KCFR	Describes whether Child Fatality Review (CFR) records are available on this victim

Uses

This variable will be used as a branch question so that negative answers will trigger “not applicable” to be filled in for all data elements that are part of the CFR Module. It will also provide an estimated frequency for available CFR records on child violent deaths in NVDRS sites that are collaborating with Child Fatality Review programs.

Discussion

Code “KCFR” as “no” if the records have been requested for a child victim and the CFR program either does not have a record on the victim or is unable to supply the record.

Name	Label	Table	Type	Field length	Priority	Primacy
KCFR	CFR records available on victim:	Person	Number	1	O	CFR

Response Options:**KCFR**

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

SUSPECT INFORMATION

Specific person suspected: SusIdent

Suspect arrested as perp in this death: SArrest

Suspect charged as perp in this death: SusChg

Suspect prosecuted: SusPros

Suspect convicted: SConvict

CPS report or referral ever filed on the suspect: CPSRpFil

Suspect ever charged with a prior homicide: SusPrHomi

Name	Definition
SusIdent	Law enforcement identified the suspect by name
SArrest	Suspect was arrested as a perpetrator in this death
SusChg	Suspect was charged as a perpetrator in this death
SusPros	Suspect was prosecuted as a perpetrator in this death
SConvict	Suspect was convicted as a perpetrator in this death
CPSRpFil	Child Protective Service report had previously been filed on this suspect
SusPrHomi	Suspect had been charged with a prior homicide

Uses

Information regarding the legal ramifications for the suspects (i.e., arrests, charges, prosecution and convictions) will provide insight into the legal issues surrounding violent death. Information about the suspects' past violent behavior will help highlight system issues and opportunities for improvement.

Discussion

Code "yes" to "SusIdent" if a specific person was identified by law enforcement as a suspect. If law enforcement does not know the identity (name) of the suspect, or if they only have a physical description, code "no". When answering "SusArrest", "SusChg", "SusPros" and "SusConv", consider whether the suspect was arrested, charged, prosecuted or convicted as a perpetrator in this death (i.e., not only charged with lesser offenses, such as the possession of a firearm without a permit, or reckless endangerment). Similarly, "CPSRpFil" refers to a prior CPS report being filed on the suspect as a perpetrator. "SusPrHomi" refers to charges of homicide perpetration prior to this victim, regardless of outcome. Data to complete these data elements will primarily come from CPS and Law Enforcement records.

Name	Label	Table	Type	Field length	Priority	Primacy
SusIdent	Specific person suspected:	Person	Number	1	O	CFR
SArrest	Suspect arrested as perp in this death:	Person	Number	1	O	CFR
SusChg	Suspect charged as perp in this death:	Person	Number	1	O	CFR
SusPros	Suspect prosecuted:	Person	Number	1	O	CFR
SConvict	Suspect convicted:	Person	Number	1	O	CFR
CPSRpFil	CPS report or referral ever filed on the suspect:	Person	Number	1	O	CFR
SusPrHomi	Suspect ever charged with a prior homicide:	Person	Number	1	O	CFR

Response Options:**SusIdent and SArrest**

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

SusChg and SusPros

- 0 No
- 1 Yes
- 3 Pending
- 7 Not collected
- 8 Not applicable
- 9 Unknown

SConvict

- 0 Acquitted
- 1 Convicted of original charge
- 2 Convicted of lesser charge
- 3 Pending/in progress
- 6 Other
- 7 Not collected
- 8 Not applicable
- 9 Unknown

CPSRpFil and SusPrHomi

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

COMMITTEE DECISIONS

CFR conclusion matches official manner of death: KConclud

If no, manner the CFR designated: KManner

Text to specify other manner: KMannTxt

Action taken to change the official manner: KAction

Result of action: KResult

CFR concluded the death was preventable: KPrevent

Name	Definition
KConclud	Did the CFR designation of the child's manner of death match the death certificate manner?
KManner	Manner of death designated by the CFR
KMannTxt	Text field for CFR manner of death if "other"
KAction	Was action taken by the CFR to change the manner of death?
KResult	Result of action taken by the CFR to change the manner of death
KPrevent	CFR conclusions regarding the preventability of the death

Uses

The information gathered from these variables will help provide an estimate of the frequency with which the results of the CFRT review are inconsistent with the more standard official documents, as well as the nature of and response to inconsistency. Many CFRTs assess the preventability of a given child death as a way of conceptualizing interventions likely to prevent a similar death in the future. While CFRTs may use differing definitions of preventability, it will be helpful to get a thumbnail sketch of the relative frequency of potentially preventable child violent deaths.

Discussion

The first four questions refer to the conclusions drawn by the CFRT after reviewing the death. The CFRT's conclusions are being compared to the officially designated manner of death as originally specified on the death certificate (or, if the death certificate was unavailable to the committee at the time of their review, the CME report). Code "KConclud" as "yes" if the CFRT's manner of death matched the manner of death originally designated on the death certificate. Code "KConclud" as "no" if the CFRT determined that the manner of death was something other than that assigned in the death certificate data, and supply the manner chosen by the CFRT in "KManner". (Please note that because of an error, the code list for "KManner" does not correspond to the code list for "Manner", so use care in selecting the code.) "Undetermined" under "KManner" refers to the affirmative designation of undetermined as the CFRT's manner of death. "Unknown" is to be used if the information is not available at the time of data entry. Please use the text box to explain "uncodeable" answers. Some CFRTs designate the degree to which a child's death was preventable (e.g., definitely preventable, probably

preventable, probably not preventable). Respondents should collapse the levels they use to answer the question as “yes”, “no”, or “undetermined”. If the teams indicate any possibility of prevention (e.g., possibly preventable, probably preventable), code as “Yes”. “Unable to determine preventability” is an affirmative designation (i.e., it is specifically noted on the CFRT form) otherwise, code “Unknown”.

Name	Label	Table	Type	Field length	Priority	Primacy
KConclud	CFR conclusion matches official manner of death:	Person	Number	1	O	CFR
KManner	If no, manner the CFR designated:	Person	Number	2	O	CFR
KMannTxt	Text to specify other manner:	Person	Text	30	O	CFR
KAction	Action taken to change the official manner:	Person	Number	1	O	CFR
KResult	Result of action:	Person	Number	1	O	CFR
KPrevent	CFR concluded the death was preventable:	Person	Number	1	O	CFR

Response Options:

KConclud

- 0 No
- 1 Yes
- 2 CFRT does not make this comparison
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KManner

- 1 Homicide
- 2 Suicide
- 3 Natural
- 4 Accident/Unintentional
- 5 Undetermined
- 6 Other
- 7 CFRT does not designate manner
- 77 Not collected by reporting site
- 88 Not applicable
- 99 Unknown

KMannTxt

- None

KAction

- 0 No
- 1 Yes
- 2 CFRT does not initiate changes to manner
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KResult

- 0 No change
- 1 Manner changed to agree w CFRT
- 2 Pending
- 6 Other
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KPrevent

- 0 Not preventable
- 1 Preventable
- 2 Unable to determine preventability
- 3 CFRT does not determine preventability
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

VICTIM CIRCUMSTANCE

History of inpatient psychiatric treatment: HstPsyTr

Taking psychiatric med. at time of death: PsyMed

Barriers to accessing mental health care: BarAcsTr

Name	Definition
HstPsyTr	Has victim ever been treated as an inpatient for psychiatric problems?
PsyMed	Victim had a current prescription for a psychiatric medication at the time of the incident
BarAcsTr	Victim experienced barriers to accessing mental health care (applicable only to victims coded as having a mental health problem and not being in treatment)

Uses

These variables will provide in-depth information about mental health treatment for children who commit suicide than is currently collected by the main reporting system for adult victims. “HstPsyTr” can be used as an indicator of the severity of the mental health disorder, and PsyMed, when used in conjunction with toxicology results, may be useful in identifying patients in current treatment who were not complying with treatment. “BarAcsTr” will help identify potential barriers to accessing mental health care.

Discussion

These variables supplement the basic Suicide Circumstances related to mental health. Indicate that the child received inpatient psychiatric care if there is a documented history of inpatient psychiatric treatment ever, not just at the time of death. “PsyMed” refers to whether the patient had an active prescription for psychiatric medication at the time of death. They need not have actually been taking the medication. When available, toxicology results will assist in the assessment of whether the decedent was taking the medication prescribed.

If a child victim was noted as having a mental health problem and not being in mental health treatment, the “BarPsyTr” variable will document whether any evidence exists in the record to indicate that the victim encountered barriers in accessing mental health treatment. Code “yes” if there were obstacles such as lack of insurance coverage, transportation problems, or long waiting lists or if it is known that treatment was either recommended by a health professional and/or identified by the family and care was not received. Describe the barrier in the Incident Narrative.

Name	Label	Table	Type	Field length	Priority	Primacy
HstPsyTr	History of inpatient psychiatric treatment:	Person	Number	1	O	CFR
PsyMed	Taking psychiatric med. at time of death:	Person	Number	1	O	CFR
BarAcsTr	Barriers to accessing mental health care:	Person	Number	1	O	CFR

Response Options:

HstPsyTr through BarAcsTr

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

VICTIM INFORMATION

Victim had a physical illness at time of injury: KIllness

If yes, specify diagnosis: KIllTxt

Victim had disability at time of injury: KDisable

If yes, disability was physical: KDisPhy

If yes, disability was developmental: KDisDev

If yes, disability was sensory: KDisSens

Name	Definition
KIllness	Victim had an acute or chronic illness at the time of the incident
KIllTxt	Free text field to indicate diagnosis if victim was ill at the time of the incident
KDisable	Victim had a disability at the time of the incident
KDisPhy	Victim's disability was physical (e.g., paraplegic, cerebral palsy)
KDisDev	Victim's disability was developmental (e.g., mentally retarded, autistic)
KDisSens	Victim's disability was sensory (e.g., blind, deaf)

Uses

Information about the victim's state of health at the time of the fatal incident can be helpful in determining potential risk factors for violent death. The stress of caring for an acutely or chronically ill child can be a burden on a caregiver and contribute to abusive behavior. Chronic illness can also be associated with depression, low self-esteem, and substance abuse among older children, resulting in a higher risk for suicidal and homicidal behavior. This data element will help inform intervention and prevention efforts.

Discussion

Physical illness may be acute (e.g., viral gastroenteritis, pneumonia) or chronic (e.g., diabetes, asthma, sickle cell anemia). The severity of the illness should not be considered when coding "KIllness"; any mention in the record of the victim being physically ill at the time of the incident can warrant coding "KIllness" as "yes". Physical disability implies a chronic physical impairment that has a long-term effect on the child's day-to-day functioning (e.g., cerebral palsy). Developmental disability implies a chronic cognitive or developmental deficit that has a long-term effect on the child's day-to-day functioning (e.g., autism, mental retardation). Sensory disability implies a chronic sensory deficit that has a long-term impact on the child's day-to-day functioning (e.g., blindness, deafness). Prematurity in and of itself should not be considered an illness or disability unless it resulted in a condition that fits into one of those categories (e.g., chronic lung disease). If a child was not specifically diagnosed with or documented to have one of the listed disabilities, answer "No". The answer "No" may thereby include missing and unknown and "Known not to be present". The information used to complete this data element may come from parental history (as per law enforcement or CPS records), medical records or autopsy.

Name	Label	Table	Type	Field length	Priority	Primacy
KIllness	Victim had a physical illness at time of injury:	Person	Number	1	O	CFR
KIllTxt	If yes, specify diagnosis:	Person	Text	40	O	CFR
KDisable	Victim had disability at time of injury:	Person	Number	1	O	CFR
KDisPhy	If yes, disability was physical:	Person	Number	1	O	CFR
KDisDev	If yes, disability was developmental:	Person	Number	1	O	CFR
KDisSens	If yes, disability was sensory:	Person	Number	1	O	CFR

Response Options:

KIllness

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KIllTxt

None

KDisable through KDisSens

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

PRENATAL CARE (For victims age one year or less)

Prenatal care prior to the 3rd trimester: KPNCare

Maternal recreational drug use: KPNSubs

Maternal alcohol use: KPNAIcoh

Maternal tobacco use: KPNTob

Name	Definition
KPNCare	Victim's mother received early prenatal care while pregnant with the victim
KPNSubs	Victim was exposed to recreational drugs in utero
KPNAIcoh	Victim was exposed to alcohol in utero
KPNTob	Victim was exposed to tobacco in utero

Uses

These data elements are collected only on victims ages 12 months or less. The prenatal care variable will help to explain the relationship between the presence and duration of prenatal care and violent child death. Lack of adequate prenatal care may be a proxy for a variety of risk factors that may relate to violent child death (e.g., neglect, educational level, investment in the concept of well care). Information gathered from all of these data elements will provide indirect information about the psychosocial environment of the child and medical information. Certain conditions place the child at increased risk for developmental delay and other long-term sequelae which may place them at higher risk for violent death.

Discussion

Prenatal care is defined as pregnancy-related medical care delivered by a doctor, nurse or other health professional with the goal of monitoring the pregnancy, providing education, and increasing the likelihood of a positive maternal and fetal outcome. Answer "yes" only if there are documented prenatal visits before the third trimester. Maternal recreational drug use includes all drugs (except alcohol and tobacco) that are either non-prescription or being used in a manner inconsistent with safe prescribing practices. Answer "yes" only if there is documented evidence or clear reports of substance or alcohol use during pregnancy with the victim. The data element should be coded "no", despite history of maternal substance, alcohol and/or tobacco use with prior pregnancies, if it is not documented or evident during her pregnancy with the victim.

Name	Label	Table	Type	Field length	Priority	Primacy
KPNCare	Prenatal care prior to the 3rd trimester:	Person	Number	1	O	CFR
KPNSubs	Maternal recreational drug use:	Person	Number	1	O	CFR
KPNAlcoh	Maternal alcohol use:	Person	Number	1	O	CFR
KPNTob	Maternal tobacco use:	Person	Number	1	O	CFR

Response Options:

KPNCare through KPNTob

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

CHILD PROTECTIVE SERVICES (CPS) REPORTS

Prior CPS report on the victim's household: KCPSRept

If yes, CPS report filed on whom: KCPSWho

If yes, report substantiated: KCPSTrue

Physical abuse substantiated: KCPSPhys

Sexual abuse substantiated: KCPSSex

Neglect substantiated: KCPSNeg

CPS case opened on other kids due to this death: KCPSOpen

Name	Definition
KCPSRept	Prior CPS report was filed on the victim's household
KCPSWho	Person on behalf of whom or against whom a CPS report was filed
KCPSTrue	At least one prior CPS report filed on the victim's household was substantiated
KCPSPhys	At least one substantiated CPS report filed on the victim's household was for physical abuse
KCPSSex	At least one substantiated CPS report filed on the victim's household was for sexual abuse
KCPSNeg	At least one substantiated CPS report filed on the victim's household was for neglect
KCPSOpen	A CPS case was opened on other children as a result of this death

Uses

Information regarding prior reports on the victim and/or another child in the victim's household as victims of maltreatment will help characterize the decedent's environment. A history of maltreatment is also a risk factor for homicidal and suicidal behaviors among adolescents. Information from these data elements may give feedback about systems issues and elucidate opportunities for secondary prevention at a systems level.

Discussion

All of the questions except for "KCPSOpen" refer to CPS contacts prior to the current incident, and not contacts that resulted from the current case. "Household" is defined as the residence where the victim lived the majority of the time when the fatal incident occurred. Household was chosen as the unit for this question to characterize the victim's environment. If the victim was living with a foster family or in an institution at the time of the fatal incident, answer regarding the family of origin. If known maltreatment existed in the foster family, describe in incident narrative. Please note that a report or referral can be in reference to a child or an adult living in the household. When the only information available is that a report was filed on the household, indicate unknown for "KCPSWho". If a report was not made on behalf of a child in the household, but a report was filed against an adult who currently lives in the household (e.g., no reports against

the victim's mother, but the mother's boyfriend was previously investigated for abuse), code "KCPSWho" as "adult in household". Any substantiation should be coded as "yes" even if some of the reports or referrals were substantiated and others were not. This information can be obtained primarily from social services or CPS records, although law enforcement and CME records may serve as secondary data sources.

Name	Label	Table	Type	Field length	Priority	Primacy
KCPSRept	Prior CPS report on the victim's household:	Person	Number	1	O	CFR
KCPSWho	If yes, CPS report filed on whom:	Person	Number	1	O	CFR
KCPSTrue	If yes, report substantiated:	Person	Number	1	O	CFR
KCPSPHys	Physical abuse substantiated:	Person	Number	1	O	CFR
KCPSSex	Sexual abuse substantiated:	Person	Number	1	O	CFR
KCPSTNeg	Neglect substantiated:	Person	Number	1	O	CFR
KCPSTOpen	CPS case opened on other kids due to this death:	Person	Number	1	O	CFR

Response Options:

KCPSRept

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KCPSWho

- 1 Victim
- 2 Other child in household
- 3 Both
- 4 Adult in household
- 6 Other, or unspecified
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KCPSTrue through Open

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

PRIOR SYSTEM CONTACTS

Victim contact with police: KLawVict

Household's contact with police: KLawHous

Victim contact with juvenile justice system: KJuv

Victim contact with the health care system: KHealth

Victim contact with mental health services: KMHServ

Victim/ primary caregiver contact with social services: KSocial

Primary caregiver on welfare/financial assistance: KWelfare

Victim contact with WIC: KWIC

Victim contact with Medicaid: KMedicaid

Name	Definition
KLawVict	Victim had contact with police in the past 12 months
KLawHous	Household had contact with police in the past 12 months
KJuv	Victim had contact with juvenile justice system in the past 12 months
KHealth	Victim had contact with health care system in the past 12 months
KMHServ	Victim had contact with mental health services in the past 12 months.
KSocial	Victim/primary caregiver had contact with social services in the past 12 months
KWelfare	Primary caregiver was on welfare/financial assistance in the past 12 months
KWIC	Victim had contact with WIC in the past 12 months
KMedicaid	Victim had contact with Medicaid in the past 12 months

Uses

The victim may have contact with the system at many different points. Each instance is a potential opportunity to prevent violent death. The information collected in this data element will demonstrate where children who suffer from different types of violent death tend to come into contact with the system. Recognizing these patterns may serve as a guide for allocating resources for prevention.

Discussion

“Unknown” will be used to indicate that the information is not available to the CFR program. “No” indicates that the records are available for review and there is no contact documented. “KLawVict”, “KJuv”, “KHealth”, “KMHServ”, “KWIC”, and “KMedicaid” all refer to whether the child/victim had contact with these points in the system prior to the fatal incident. “KSocial” asks if either the child or the primary caregiver had contact with the public health system (e.g., health educator home visits) prior to the fatal incident. And “KWelfare” refers to whether the primary caregiver of the victim was on

welfare or receiving governmental financial assistance. “KLawHous” refers to the household’s history of contact with law enforcement (e.g., police being called by neighbors secondary to domestic disturbance).

Name	Label	Table	Type	Field length	Priority	Primacy
KLawVict	Victim contact with police:	Person	Number	1	O	CFR
KLawHous	Household’s contact with police:	Person	Number	1	O	CFR
KJuv	Victim contact with juvenile justice system:	Person	Number	1	O	CFR
KHealth	Victim contact with the health care system:	Person	Number	1	O	CFR
KMHServ	Victim contact with mental health services:	Person	Number	1	O	CFR
KSocial	Victim/primary caregiver contact with social services:	Person	Number	1	O	CFR
KWelfare	Primary caregiver on welfare/financial assistance:	Person	Number	1	O	CFR
KWIC	Victim contact with WIC:	Person	Number	1	O	CFR
KMedicaid	Victim contact with Medicaid:	Person	Number	1	O	CFR

Response Options:

KLawVict through KMedicaid

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

Type of residence in which victim lived: KResType
New living situation in past month: KResNew

Name	Definition
KResType	Victim's type of primary residence
KResNew	Victim's primary residence was new within the past month

Uses

These data elements provide information about the type of residence and presence of recent change in the victim's primary residence at the time of the fatal incident. A better understanding of these issues will provide insight into residence-related risk factors for child violent deaths.

Discussion

All child victims are to be asked these questions. Primary residence is the place where the victim lived the majority of the time when the incident occurred (not at the time of death if the residences were different). For example, if a child is injured in her own family home, and dies four months later in the hospital, answer questions regarding her own family home. "Victim's family home" is defined as victim's self-identified family where applicable; this may be biological parents, other relatives, adoptive or stepparents. "On own" indicates that the decedent was living separately from his/her family (e.g., living with boyfriend or peers). If the victim was known to be moving from place to place without a permanent residence (i.e., "on the run"), or if the victim was a newborn who was still in the hospital, code as "Not applicable" and describe in the incident narrative. If the victim was living anywhere other than with his or her family, code whether the living situation was new within the past month.

Name	Label	Table	Type	Field length	Priority	Primacy
KResType	Type of residence in which victim lived:	Person	Number	2	O	CFR
KResNew	New living situation in past month:	Person	Number	1	O	CFR

Response Options:

KResType

- 1 Victim's family's home
- 2 Foster family home
- 3 On own, e.g., living w/ boyfriend
- 4 Residential group home
- 5 Shelter
- 6 Juvenile detention facility, jail, prison
- 7 School/college
- 66 Other
- 77 Not collected by reporting site
- 88 Not applicable (homeless or adult)
- 99 Unknown

KResNew

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

HOUSEHOLD INFORMATION

Victim relationship to adult 1 in household: KAdult1

Victim relationship to adult 2 in household: KAdult2

Victim relationship to adult 3 in household: KAdult3

Victim relationship to adult 4 in household: KAdult4

Other children <18 yrs in household: KKids

Intimate partner violence in victim's household: KDV

Substance abuse in victim's household: KSubs

Intimate partner violence in victim's foster home: KDVFos

Substance abuse in victim's foster home: KSubsFos

Name	Definition
KAdult1	Relationship of adult 1 to victim (adult living in victim's household)
KAdult2	Relationship of adult 2 to victim (adult living in victim's household)
KAdult3	Relationship of adult 3 to victim (adult living in victim's household)
KAdult4	Relationship of adult 4 to victim (adult living in victim's household)
KKids	Presence of other children under 18 living in the victim's household
KDV	Evidence of intimate partner violence in victim's household
KSubs	Evidence of substance abuse in victim's household
KDVFos	Evidence of intimate partner violence in victim's foster family (if applicable)
KSubsFos	Evidence of substance abuse in victim's foster family (if applicable)

Uses

These variables indicate who was living with the victim at the time of the incident. They also elucidate the child's exposure to violence and substance abuse in the home.

Discussion

These questions apply to children who lived with their own family, on their own, or with a foster family at the time of the fatal incident. Adult is defined as a person who is 18 years of age or older, including primary caregivers. If the victim lived in an institution (e.g., shelter, school, juvenile detention facility) at the time of the fatal incident, mark "Not Applicable". A maximum of four adults in the residence may be coded. Coding options are listed in order of the priority of the relationship (e.g., if biological mom, her lover, the child's aunt and uncle, and maternal grandmother are all in residence, prioritize coding mother's lover over the adult relatives). If the CFR information available mentions the mother of the child and it is unclear whether there were other adults in the household, code "KAdult2" through "KAdult4" as Unknown. If the CFR information available mentions the mother and specifies that no other adults were living in the

household, code “KAdult 2” through “KAdult4” as “Not Applicable”. If there were circumstances at the time of death that contributed to the child’s death, explain in the incident narrative. For example, if a child is in a vegetative state secondary to shaken baby syndrome and dies of pneumonia three years later, answer regarding the household at the time of the shaking. However, if something about the quality of the child’s foster care at the time of death was also contributory to her death, note that in the incident narrative. “KDV” and “KSubs” are to be asked about all children. For children who lived with their families or were institutionalized (either temporarily or permanently), answer the questions regarding the family of origin. For permanently institutionalized children with no family to return to, the answer will be “Not Applicable”. For children in foster care, answer the questions regarding both the foster home (KDVfos and KSubsFos) and the family of origin.

Name	Label	Table	Type	Field length	Priority	Primacy
KAdult1	Household adult 1’s relationship to victim:	Person	Number	2	O	CFR
KAdult2	Household adult 2’s relationship to victim:	Person	Number	2	O	CFR
KAdult3	Household adult 3’s relationship to victim:	Person	Number	2	O	CFR
KAdult4	Household adult 4’s relationship to victim:	Person	Number	2	O	CFR
KKids	Other children <18 yrs in household:	Person	Number	1	O	CFR
KDV	Intimate partner violence in victim’s household:	Person	Number	1	O	CFR
KSubs	Substance abuse in victim’s household:	Person	Number	1	O	CFR
KDVfos	Intimate partner violence in victim’s foster home:	Person	Number	1	O	CFR
KSubsFos	Substance abuse in victim’s foster home:	Person	Number	1	O	CFR

Response Options:

KAdult1

- 1 Biological mother
- 2 Biological father
- 3 Stepmother
- 4 Stepfather
- 5 Adoptive mother
- 6 Adoptive father
- 7 Foster mother
- 8 Foster father
- 9 Relative foster care provider
- 10 Mother's lover
- 11 Father's lover
- 12 Other adult relative
- 13 Other non-relative
- 77 Not collected by reporting site
- 88 Not applicable (child in institution or <4 adult)
- 99 Unknown

KKids Through KSubsFos

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

SUPERVISION

Supervisor's relationship to victim: KSupRel
Supervisor's age: KSupAge
Supervisor's sex: KSupSex
Quality of supervision contributed to death: KSuperv
No supervision: KSupNo
Not protected from known hazard: KSupHaz
Supervisor drug-impaired: KSupdrug
Supervisor alcohol-impaired: KSupEtoh
Supervisor mentally ill: KSupPsych
Supervisor mentally retarded: KSupMr
Supervisor physically disabled: KSupDis
Supervisor distracted: KSupBusy
Supervisor asleep: KSupDoze
Other supervisory factor: KSupOther

Name	Definition
KSupRel	Relationship of the supervisor to the victim
KSupAge	Age of the supervisor
KSupSex	Sex of the supervisor
KSuperv	Did the quality of supervision contribute to the death of the victim?
KSupNo	No supervision of the victim
KSupHaz	The victim was not protected from a known hazard
KSupDrug	The supervisor was drug-impaired
KSupEtoh	The supervisor was alcohol-impaired
KSupPsych	The supervisor was mentally ill
KSupMr	The supervisor was mentally retarded
KSupDis	The supervisor was physically disabled
KSupBusy	The supervisor was distracted
KSupDoze	The supervisor was asleep
KSupOther	Other supervisory factor contributed to victim's death

Uses

Inadequate supervision can increase the likelihood of unintentional firearm injuries, suicide, and homicide. This association is especially true for younger children. This group of variables describes the inadequacy only when it played a role in the victim's violent injury, thereby informing prevention efforts.

Discussion

The supervisor has the primary responsibility of the care and control of the child at the time of the fatal injury. If there were two supervisors at the time of the fatal incident, but one clearly had primary responsibility, code the person with the primary responsibility. If the responsibility of supervision was equally divided between two people, code the person whose supervision quality seemed most contributory to the child's death. This group of data elements purposefully leaves the determination of supervision adequacy up to the Child Fatality Review Team (CFRT) involved, thereby allowing the group with direct access to the data to make the judgment. "Quality of supervision" refers specifically to the quality of supervision at the time the fatal injury occurred, and not to parenting style in general. "No supervision present" should be indicated if no arrangements for supervision were made (e.g., leaving a three year-old unattended for half an hour). If an inappropriately young or old supervisor was appointed, specify the circumstances under "other". A specific example of "known hazards" would be the mother leaving her child in the care of a boyfriend with a known history of violence, or allowing a young child to play with a firearm. If any of the factors listed was present (e.g., physical disability), but not contributory to the quality of the supervision, it should not be coded as "1". Any additional exceptional circumstances may be described in the incident narrative. All of the variables are based on the CFRT's findings, even though information to support their findings may originate from multiple sources.

Name	Label	Table	Type	Field length	Priority	Primacy
KSupRel	Supervisor's relationship to victim:	Person	Number	1	O	CFR
KSupAge	Age of supervisor:	Person	Number	3	O	CFR
KSupSex	Sex of supervisor:	Person	Number	1	O	CFR
KSuperv	Quality of supervision contributed to death:	Person	Number	1	O	CFR
KSupNo	No supervision:	Person	Checkbox	1	O	CFR
KSupHaz	Not protected from known hazard:	Person	Checkbox	1	O	CFR
KSupDrug	Supervisor drug-impaired:	Person	Checkbox	1	O	CFR
KSupEtoh	Supervisor alcohol-impaired:	Person	Checkbox	1	O	CFR

Name	Label	Table	Type	Field length	Priority	Primacy
KSupPsych	Supervisor mentally ill:	Person	Checkbox	1	O	CFR
KSupMr	Supervisor mentally retarded:	Person	Checkbox	1	O	CFR
KSupDis	Supervisor physically disabled:	Person	Checkbox	1	O	CFR
KSupBusy	Supervisor distracted:	Person	Checkbox	1	O	CFR
KSupDoze	Supervisor asleep:	Person	Checkbox	1	O	CFR
KSupOther	Other supervisory factor:	Person	Checkbox	1	O	CFR

Response Options:

KSuperv

- 0 No, supervision was appropriate
- 1 Yes, supervisor was NOT the perpetrator
- 2 Yes, supervisor was the perpetrator
- 3 Supervision not needed or expected
- 4 CFRT could not determine
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KSupRel

- 1 Primary caregiver
- 2 Other adult relative
- 3 Babysitter/child care provider
- 4 Primary caregiver's boy/girlfriend
- 5 Sibling/step-sibling
- 6 Other, specify in incident narrative
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KSupAge

None

KSupSex

- 1 Male
- 2 Female
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

KSupNo through KSupOther

- 0 No, Not collected, Unknown
- 1 Yes

COMMITTEE RECORDS

CME records: KRecME

SS/CPS records: KRecCPS

Police/Law Enforcement records: KRecLaw

School records: KRecEdu

EMS records: KRecEMS

Health Provider/Hospital records: KRecMD

Public Health Department records: KRecDOH

Mental Health Records: KRecPsy

Juvenile Justice records: KRecJuv

Death certificate: KRecDC

Other records: KRecOth

Specify (what other records): KRecTxt

Name	Definition
KRecME	CME records were consulted in the CFRT review of victim's death
KRecCPS	Social service/CPS records were consulted in the CFRT review of victim's death
KRecLaw	Police records were consulted in the CFRT review of victim's death
KRecEdu	School records were consulted in the CFRT review of victim's death
KRecEMS	EMS records were consulted in the CFRT review of victim's death
KRecMD	Health records were consulted in the CFRT review of victim's death
KRecDOH	Public health department records were consulted in the CFRT review of victim's death
KRecPsy	Mental health records were consulted in the CFRT review of victim's death
KRecJuv	Juvenile Justice records were consulted in the CFRT review of victim's death
KRecDC	Death certificate records were consulted in the CFRT review of victim's death
KRecOth	Other records were consulted in the CFRT review of victim's death
KRecTxt	Free text field to note other records consulted in the CFRT review of victim's death

Uses

Information about the primary data sources consulted during the review of the victim's death indicates the comprehensiveness of the review. It will also verify the primary data sources consulted to arrive at decisions regarding adequacy of supervision and preventability.

Discussion

The primary data sources used to review a child death vary from CFR program to program and often from death to death. Code the data source as "yes" if the records were consulted regarding the death, even if the given agency ended up having no information about the victim. Do not code a source as "yes" if the only information gathered was secondary (e.g., the DSS records indicate that law enforcement performed an investigation, but the actual law enforcement records were not consulted).

Name	Label	Table	Type	Field length	Priority	Primacy
KRecME	CME records:	Person	Checkbox	1	O	CFR
KRecCPS	SS/CPS records:	Person	Checkbox	1	O	CFR
KRecLaw	Police/Law Enforcement records:	Person	Checkbox	1	O	CFR
KRecEdu	School records:	Person	Checkbox	1	O	CFR
KRecEMS	EMS records:	Person	Checkbox	1	O	CFR
KRecMD	Health Provider/Hospital records:	Person	Checkbox	1	O	CFR
KRecDOH	Public Health Department records:	Person	Checkbox	1	O	CFR
KRecPsy	Mental Health Records:	Person	Checkbox	1	O	CFR
KRecJuv	Juvenile Justice records:	Person	Checkbox	1	O	CFR
KRecDC	Death certificate:	Person	Checkbox	1	O	CFR
KRecOth	Other records:	Person	Checkbox	1	O	CFR
KRecTxt	Specify (what other records):	Person	Text	50	O	CFR

Response Options:

KRecME through KRecOth

0 No, Not collected, Unknown

1 Yes

KRecTxt

None

CAREGIVER1

Primary caregiver a victim or suspect in the incident: GPerson1

If yes, caregiver's ID in the incident: GPersID1

Relationship to victim: GRel1

Age at time of incident: GAge1

Sex: GSex1

Had legal custody of victim at time of death: GCustody1

Had documented history of maltreating: GCAN1

Had a previous child die in his/her care: GDeath1

Name	Definition
GPerson1	Is the victim's primary caregiver a victim or suspect in the incident?
GPersID1	Caregiver1's Person ID in the incident
GRel1	Caregiver1's relationship to the victim
GAge1	Age of Caregiver1 at the time of the incident
GSex1	Sex of Caregiver1
GCustody1	Caregiver1 had legal custody of the victim at time of death
GCAN1	Caregiver1 had documented history of maltreating a child
GDeath1	Caregiver1 had a previous child die in his or her care

Uses

Information (including relationship, age, gender, and legal custody status) about the victim's parents or other primary caregiver(s) may provide insight into potential risk factors for violent death among children.

Discussion

The victim's primary caregiver is defined as the person or persons (up to two) who were responsible for the care, custody, and control of the child the majority of the time when the fatal incident occurred. If the primary caregiver(s) at the time of death was different from the primary caregiver(s) at the time of the incident, answer regarding the primary caregiver(s) at the time of the incident. For example, if a baby is shaken by his biological mother as an infant and survives in a vegetative state in foster care until three years of age, code the biological mother. The primary caregiver(s) may be the child's parent or parents (biological, step, adoptive parents) or another relative. If the child was living with his/her biological or adoptive parents, assume that they were the primary caregivers and had legal custody of the decedent unless otherwise specified in the records. In the case of neonaticide, assume that the biological mother was the primary caregiver unless there is evidence that another person (e.g., father, grandmother) had assumed control of the child

as a caregiver at the time of the incident. The primary caregiver(s) may also be the state child protective services (CPS) agency/foster parent(s) or another institution in some cases. If the child is temporarily residing in foster care or an institution, complete this information for the primary caregiver(s) who was/were responsible for the victim prior to his/her placement. If the child was in another foster home prior to the current one or prior to institutionalization, please complete for the primary caregiver in the family of origin if known. "Documented history of child maltreatment" indicates a substantiated CPS report/referral or rights termination.

Name	Label	Table	Type	Field length	Priority	Primacy
GPerson1	Primary caregiver a victim or suspect in the incident:	Person	Number	1	O	CFR
GpersID1	If yes, caregiver's ID in the incident:	Person	Number	5	O	CFR
GRel1	Relationship to victim:	Person	Number	1	O	CFR
GAge1	Age at time of incident:	Person	Number	3	O	CFR
GSex1	Sex:	Person	Number	1	O	CFR
GCustody1	Had legal custody of victim at time of death:	Person	Number	1	O	CFR
GCAN1	Had documented history of maltreating:	Person	Number	1	O	CFR
GDeath1	Had a previous child die in his or her care:	Person	Number	1	O	CFR

Response Options:

GPerson1

- 0 No
- 1 Yes
- 7 Not collected by reporting site
- 8 Not applicable
- 9 Unknown

GpersID1

None

GRel1

- 1 Biologic parent
- 2 Stepparent
- 3 Adoptive parent
- 4 Other relative
- 5 Parent's intimate partner
- 6 Other nonrelative
- 7 Not collected
- 8 Not applicable
- 9 Unknown

GAge1
None
GSex1
1 Male
2 Female
9 Unknown
GCustody1 and GDeath1
0 No
1 Yes
7 Not collected by reporting site
8 Not applicable
9 Unknown

CAREGIVER2 Primary caregiver a victim or suspect in the incident:

GPerson2

If yes, caregiver's ID in the incident: GPersID2

Relationship to victim: GRel2

Age at time of incident: GAge2

Sex: GSex2

Had legal custody of victim at time of death: GCustody2

Had documented history of maltreating: GCAN2

Had a previous child die in his/her care: GDeath2

See Person/CFR Caregiver and Family Information/Caregiver1 Elements for information about variable(s) appearing above.